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UTILITY	Attorney D	ocket No.	RIGL-010CIP3							
PATENT APPLICATION	First Inven	tor	LUO, YING							
TRANSMITTAL	Title	TANKYRASE H	, COMPOSITIONS ETHODS OF USE	S.						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	lail Label No.	EV334000467US		25						
APPLICATION ELEMENTS		ADDRESS	Assistant Com	missioner for Patents	556					
SEE MPEP chapter 600 concerning utility patent application c	ontents.	ADDITION	Washington, D		(-1					
Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix		8. Nucleotide fit applicable a. Complete Complet	ROM or CD-R in duplica puter Program (Append and/or Amino Acid Seq e, all necessary) puter Readable Form (to on Sequence Listing or CD-ROM or CD-R to paper	dix) quence Submission CRF) n: (2 copies); or						
-Background of the Invention -Brief Summary of the Invention	-Background of the Invention									
-Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Pages: 21] 5. Oath or Declaration [Total Pages:] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63 (d)). (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. Application Data Sheet. See 37 CFR 1.76		9. Assignment of the control of the	gnment Papers (cover some papers) FR 3.73(b) Statement in there is an assignee) sh Translation Docume mation Disclosure imment (IDS)/PTO-1449 minary Amendment im Receipt Postcard (Muld be specifically item. fied Copy of Priority Doceign priority is claimed publication Request und (IB)(i). Applicant must equivalent.	ent (if applicable) Copies of IDS Citation IPEP 503) ized) coument(s) der 35 U.S.C. 122 attach form PTO/SB/35 d in a preliminary amendment						
Prior application information: Examiner: Manjunath N. Rao Group Art Unit: 1652 For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. Customer Number or Bar Code Label										
Address City Menlo Park	State	California Zip 94025								
	elephone	(650) 327-3400	Code Fax	(650) 327-3231						
Nâme James S. Keddie, Ph.D.		Registration No. (A		48,920						
Signature LIMP Subdel			Date	July 8, 2003						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL			Application Number						
			Filing Date			٠.	-		
for FY 2003	First Named Inventor			nventor	LUO, YING	LUO, YING			
Effective 01/01/2003. Patent fees are subject to annual revision				ne					
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Applicant claims small entity status. See 37 CFR 1.27		Art Unit			<u> </u>				
TOTAL AMOUNT OF PAYMENT (\$) 1232	/	Attorney	y Dock	et No.	RIGL-010CI	CIP3			
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
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Deposit Account Name Bozicevic, Field & Francis LLP	1051	130	2051	65 5	Surcharge – late filin	g fee or oath	10 m		
The Commissioner authorized to: (check all that apply) ☐ Charge fees indicated below ☐ Credit any overpayments	1052				Surcharge – late pro	visional filing fee	or		
☐ Charge any additional fee(s) during the pendency of this	1053	. 130	1053		over sheet Von-English specific	ation			
application ☐ Charge fees indicated below, except for the filing fee	1812	2,520	1812		or filing a request for	and the second second	nination		
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1001 750 2001 375 Utility filing fee 375	1253	930	2253	465 E	Extension for reply w	ithin third month			
1002 330 2002 165 Design filing fee	1254	1,450	2254	725 E	Extension for reply w	ithin fourth month			
1003 520 2003 260 Plant filing fee	1255	1,970	2255	985 E	Extension for reply w	ithin fifth month			
1004 750 2004 375 Reissue filing fee	1401	320	2401	160 N	Notice of Appeal				
1005 160 2005 80 Provisional filling fee	1402	320	2402	160 F	iling a brief in supp	ort of an appeal			
SUBTOTAL (1) 375	1403	280	2403	140 F	Request for oral hea	ring			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1451	51 1,510 1451 1,510 Petition to institute a public use proceeding							
Fee from	1452	110	2452	55 F	Petition to revive – u	navoidable			
Extra Claims below Fee Paid	1453	1,300	2453	650 F	Petition to revive – u	nintentional			
Total Claims 53 -20** = 33 x 9 = 297	1501	1,300	2501	650 L	Itility issue fee (or re	eissue)			
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1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375 F	For each additional i	nvention to be			
1204 84 2204 42 ** Reissue independent claims	1801	750	2801		Request for Continue	,	CE)		
over original patent	1802	900	1802		Request for expedite		į		
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SUBTOTAL (2) \$ 857 **or number previously paid, if greater, For Reissues, see above.	*Redu	uced by B	Basic Fil	ing Fee P	'aid	SUBTOTAL	(3) (\$)		
SUBMITTED BY					Complete (if a				
No. (Date of the last of the l		ration No.			····		(050) 007 0465		
Name (Print/Type) James S. Keddie, Ph.D.	(Attorn	ey/Agent	<i>l</i>	48,920	<u>, </u>	Telephone	(650) 327-3400		
Signature (1)					<u> </u>	Date	07/08/2003		

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